

CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)	Docket No. 30554.05700
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Appl. No. : 09/833,448
Applicant(s) : Letovsky *et al.*
Filed : April 12, 2001
TC/A.U. : 3713
Examiner : Yveste Cherubin
Docket No. : 30554-05700
Customer No. : 27171
Title : *Method and System for Broadcast and Control of a Remotely Located Wagering Device*

I hereby certify that this :

Certificate of Mailing by Express Mail (Label No. EV 251 631 735US);
Transmittal Letter; Fee Transmittal; Petition for Extension of Time (three months); Amendment; Information Disclosure Statement w/ 3 pg. Information Disclosure Citation; and return receipt postcard.

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August 21, 2007

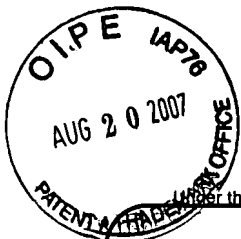
Christopher J. Gaspar

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EV 251 631 735US

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/833,448	
	Filing Date	April 12, 2001	
	First Named Inventor	Letovsky et al.	
	Art Unit	3713	
	Examiner Name	Yveste Cherubin	
Total Number of Pages in This Submission	23	Attorney Docket Number	30554.05700

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input checked="" type="checkbox"/> Information Disclosure Statement w/ 3 sheets PTO-1449	<input type="checkbox"/> Request for Refund	Label No. EV 251 631 735 US
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<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual	Christopher J. Gaspar, Reg. No. 41, 030 Milbank, Tweed, Hadley & McCloy, LLP 1 Chase Manhattan Plaza, NY NY 10005
Signature	
Date	August 21, 2007

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Typed or printed	Christopher J. Gaspar		
Signature		Date	August 21, 2007

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